FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000072474 (6)

HEALTH AND WELLNESS AWARENESS INTERNATIONAL, INC

Principal Place of Business 1520 LOCKMEADE PLACE OLDSMAR FL 34677-5121

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

Mailing Address

1520 LOCKMEADE PLACE OLDSMAR FL 34677-5121

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

FILED Apr 25 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

Not Applicable

07/05/1996

3. Date incorporated or Qualified

5. Certificate of Status Desired

09/18/1995

59-3344593

4. FEI Number

City & State)	City & State	├ ŋ ´			6. Election Campaign Financing \$5.00 May Be				
23	Country	28		ountry		Trust Fund Contribution		Added t		4
Zipi 24	Country 25	29	}			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	g, Name and Address of Curre	nt Registered Agent			· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re	gistered /	lgent]
SON	GY, JOANNA			61	Name					1
1520 LOCKMEADE PLACE OLDSMAR FL 34677-5121				82	Street Addre	ess (P.O. Box Number is Not Acceptate	ole)			1
							····			1
1				63						
				84	City			85 Zip (Code	ł
				ليل	·		FL]
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obli	e of Florida. Such chan	ge was authori	zed by	the corporati	oration submits this statement for the p on's board of directors. I hereby accep	ourpose of ot the appo	changing it pintment as	s registered registered	
SIGNATURE										
	Signature, type-d or printed harns of registered a				nt Eignatura require	od when reinstating)	DATE			ج إ
12.	P OFFICERS AI	ND DIRECTORS		3.		ADDITIONS/CHANGES TO OFFIC		DIRECTOR ☐ Change	Addition	18
NAME	SONGY, JOANNA	L., 01	B 1	1 TITLE 2 NAME				f Cliquife	L.J ADUSIOSI	15
STREEL ADDRESS	1520 LOCKMEADE PLACE				ADDRESS					8
City-St-ZiP	OLDSMAR FL 34877-5121			a city-s						CR2E034 (9/96)
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NAME	SONGY, ANTOINE P		1	2 NAME	J					1
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STREET ADDRESS					ADDRESS					}
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111LE		□ De	1	TITLE	}			Change	L.) Addition]
NAME				2 NAME						}
STREET ADDRESS					ADDRESS					
14 do heret	ov certify that the information supplied	ed with this filing does		t CITY+S		in Section 119.07(3)(i), Florida Statute	s I further	nertify that	the	┨
Informatio Lam an of	u indicated on this annual report or	supplemental annual re or the receiver or truster	eport is true an e empowered t	d accu	trate and that	my signature shall have the same legates as required by Chapter 607, Florida S	d effect as	if made un	der nath: that	